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FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APP	ROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	ae hurden

hours per response.....16.00

SEC U	SE ONLY
Prefix	Serial
DATES	RECEIVED
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time of Offering of check if this is an amendment of Legacy Coach Unit Offer		
	d name has changed, and indicate change.) -	
Img Under (Check boxies) that apply): Rule 504 Rule 504 Rule 504 Rule 504 Rule 504	☐ Rule 505 ※ Rule 506 ☐ Section 4(6	DULOE PREBÆRNA
	A. BASIC IDENTIFICATION DATA	
finer the information requested about the issuer		5/
nne of Issuer (check if this is an amendment and n Legacy Coach, LLC	ame has changed, and indicate change.)	A Partie of the Control of the Contr
	(Number and Street, City, State, Zip Code) Fugene OR 97401	Telephone Number (Including Area Code) (541) 686 - 9220
ddress of Principal Business Operations (different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
manufacture and installation of	interior Anishes in luxur	y motor coaches PROCES
ا اسط		please specify): ited liability company THOMSE
ENERAL INSTRUCTIONS		A CONTRACTOR OF THE CONTRACTOR
ideral: hin Musi File: All issuers making an offering of securities (dif).	in reliance on an exemption under Regulation E	or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C
then To File: A notice must be filed no later than 15 day and Exchange Commission (SEC) on the earlier of the date high it is due, on the date it was mailed by United States	it is received by the SEC at the address given	
·	-	0549.
there To File: U.S. Securities and Exchange Commission opies Required: Five (5) copies of this notice must be fi	n, 450 Fifth Street, N.W., Washington, D.C. 2 led with the SEC, one of which must be manua	
there To File: U.S. Securities and Exchange Commission opies Regimed: Five (5) copies of this notice must be finotocopies of the manually signed copy or bear typed or formation Required: A new filing must contain all inforereto, the information requested in Part C, and any material.	n, 450 Fifth Street, N.W., Washington, D.C. 2 led with the SEC, one of which must be manual printed signatures, maxion requested. Amendments need only rep	lly signed. Any copies not manually signed must be nort the name of the issuer and offering, any changes
there To File: U.S. Securities and Exchange Commission opies Required: Five (\$) copies of this notice must be finotocopies of the manually signed copy or bear typed or formation Required: A new filing must contain all informeto, the information requested in Part C, and any material be filed with the SEC.	n, 450 Fifth Street, N.W., Washington, D.C. 2 led with the SEC, one of which must be manual printed signatures, maxion requested. Amendments need only rep	lly signed. Any copies not manually signed must be nort the name of the issuer and offering, any changes
There To File: U.S. Securities and Exchange Commission of the Regulard: Five (5) copies of this notice must be find to copies of the manually signed copy or hear typed or information Required: A new filing must contain all information requested in Part C, and any materion be filed with the SEC. Iding Fee. There is no federal filing fee, state: This notice shall be used to indicate reliance on the Unife II.OL and that have adopted this form. Issuers relying the to be, or have been made. If a state requires the pay ecompany this form. This notice shall be filed in the a his notice and must be completed.	n, 450 Fifth Street, N.W., Washington, D.C. 2 led with the SEC, one of which must be manual printed signatures; mation requested. Amendments need only repail changes from the information previously supports Limited Offering Exemption (ULOE) for on ULOE must file a separate notice with the ment of a fee as a precondition to the claim 1	lly signed. Any copies not manually signed must be nort the name of the issuer and offering, any changes plied in Parts A and B. Part E and the Appendix need sales of securities in those states that have adopted Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

l of 9

A. BASIC IDENTIFICATION DATA	
2. Enter the inforcection requested for the following:	
 bach promoter of the issuer, if the issuer has been organized within the past five years; 	
Fach beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of	a class of equity securities of the issuer.
Each executive officer and director of corporate issuers and of corporate general and managing partners of partners.	partnership issuers; and
Each general and managing partner of partnership issuers.	
Cheek Boxies) that Apply: 🛛 Promoter 📓 Beneficial Owner 🔀 Executive Officer 🗍 Director	General and/or Managing Partner
Full Name (Last name first, if individual) Nestell, Thomas	
Business or Residence Address (Number and Street, City, State, Zip Code) 2145 Greenview St., Eugene OR 97401	
Cheek Boxtes) that Apply: Promoter 💢 Beneficial Owner 📋 Executive Officer 📋 Director	General and/or Managing Partner
Full Name (Last name first, if individual) Knecht, Wallace	
Business or Residence Address (Number and Street, City, State, Zip Code) 2145 Greenview St., Eugene OR 97401	,
Check Boxtes) that Apply: Promoter 💢 Beneficial Owner 🗀 Executive Officer 📋 Director	General and/or Managing Partner
Full Name Class name first, if individual) Pregitzer, Robert	
Business or Residence Address (Number and Street, City, State, Zip Code) 2145 Greenview St., Eugene OR 97401	
Check Box(es) that Apply: Promoter 🔀 Beneficial Owner 📋 Executive Officer 📋 Director	General and/or Managing Partner
Full Name (Last name first, if individual) Hawkins, Jack	
Business or Residence Address (Number and Street, City, State, Zip Code) 2145 Greenview St., Eugene, OR 97401	• • • • • • • • • • • • • • • • • • • •
Check Boxies) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
they black sheet or convenidate additional conject of this sheet as necessary	

					B. 13	NFORMATI	ON ABOU	T OFFERI	NG				
1.	Hac the	ecoor cald	or done th	o icenor in	dond to se	II. to non-ac	sociodiod i	avactore in	this offeri	no?		Yes	No No
١.	Tras tric	issuer som	, or trees if			Appendix.				-			Ø
2.	What is	the minim	um investm			pted from a		~				s 25	000
							•			•	*1	Yes	No
3.					_	le unit?						×	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
Full	l Name (1	ast name l	first, if indi	vidual)									
Bus	iness or	Residence	Address (N	umber and	Street, Ci	ty. State, Z	ip Code)		·				
Nan	ne of Ass	ociated Br	oker or De	aler									
Stat	ies in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	'urchasers						+
•	(Check	'All States	" or check	individual	States)	***************************************						□ A1	1 States
	M .	AK	AZ	AR	CA	(50)	CT	DE	(DC)	FL	(GA)	[111]	[ID]
		IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RE	NE SC	NV SD	[[אד] [אד]	NJ TX	[NM]	[NY] [VT]	NC VA	ND WA	OH WV	OK)	OR WY	PA PR
	(282)	1291	(-212)	<u> </u>			(<u>VI</u>)	<u> </u>	(V) A)	<u> </u>		<u>[10, 1]</u>	
Ful	l Name (ast name	first, if indi	ividual)									
Bus	siness or	Residence	Address (?	Number an	d Street, C	ity, State, 7	Zip Code)						
Nai	ne of Ass	ociated Br	oker or De	aler						<u>, , , , , , , , , , , , , , , , , , , </u>			
Stá	tës in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	1					** 1
											************	□ Al	1 States
		ΔK	[AZ]	ĀR	$\overline{C}\Lambda$	$[\overline{co}]$	[[]]	DE	[DC]	FL	GA		[ID]
		IN		KS	KY		ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NII	NJ	NM	NY	NC	ND	011	OK)	OR	PA
	(RI)	SC	SD	TN	$[\underline{TX}]$	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (.ast name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	lity, State, I	Lip Code)						
Na	me of As	sociated Br	oker or De	aler	~	 -							
-													
Sta						to Solicit						□ A1	1 States
		AK [TN]	$\begin{bmatrix} AZ \end{bmatrix}$	KS	CA KY	CO LA	CT ME	MD	DC MA	MI	GA MN	MS	MO)
	MT	NE.	NV	NII	(K)	NM	NY	NC	ND	OH	OK)	OR	PA
	RT	SC	SD	IN	\overline{TX}	UT	VT	VA	WA	WV	WI	WY	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold 0 Common Preferred Convertible Securities (including warrants) \$ 0 s_____s___s Other (Specify <u>limited liability company units</u> \$3,000,000 \$1,275,000 \$3,000,000 Answer also in Appendix, Column 3, if filing under ULOE. Linter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors _10 Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question I. Type of Dollar Amount The second second Type of Offering Security Sold Rule 505 Regulation A Rule 504 Total___ Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is

a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer.

The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees.

Printing and Engraving Costs.

Legal Fees.

Accounting Fees.

Engineering Fees.

Sales Commissions (specify finders' fees separately).

Other Expenses (identify)

Total.

Total.

	C. OFFERING PRICE	, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	and total expenses furnished in response to Pa	nte offering price given in response to Part C — Question 1 art C — Question 4.a. This difference is the "adjusted gross"	8	s 2,987,500
5.	each of the purposes shown. If the amoun	ross proceed to the issuer used or proposed to be used for t for any purpose is not known, furnish an estimate and total of the payments listed must equal the adjusted gross to Part C — Question 4.5 above.	!	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Purchase of real estate		<u>\$</u>	_ 🗆 \$
	Purchase, rental or leasing and installation		□ ¢	m + 700 000
	Construction or leasing of plant buildings	and facilities		210,000
	Acquisition of other businesses (including offering that may be used in exchange for	the value of securities involved in this the assets or securities of another		
	Repayment of indebtedness		U \$	
	Other tensities		☐ \$	8 1 41 1 200
				- U »
			S	s
	Column Totals		xs120.000	₩ \$ 2.867.50
	Total Payments Listed (column totals adde	:d)	· ·	2,987,500
		D. FEDERAL SIGNATURE		
The sig	c issuer has duly caused this notice to be signe nature constitutes an undertaking by the issue	d by the undersigned duly authorized person. If this notice of the undersigned duly authorized person. If this notice of the unit of the U.S. Securities and Exchange Common-accredited investor pursuant to paragraph (b)(2) of	ce is filed under Ru ission, upon writte	
	ner (Print or Type)	Signature	Date / /	
(_egacy Coach, LLC	Cohen Vso	4/14/0	4
	me of Signer (Print or Type)	Title of Signer (Print or Type)		
Nii	Thomas Nestell	Managing Manager		

L	E. STATE SIGNATURE						
١.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?						
	See Appendix, Column 5, for state response.	•					
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a D (17 CFR 239.500) at such times as required by state law.	notice on Form					
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information issuer to offerees.	furnished by the					
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming of this exemption has the burden of establishing that these conditions have been satisfied.						
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by alhorized person.	the undersigned					
	egacy Coach, LLC Signature Date 4/14/04						
Name t	homas Nestell Managing Manager						

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDIX								
1	Intend to non-a investor	to sell accredited in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					lification ate ULOE attach attion of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		X							×
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DC	 -								
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	APPENDIX										
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 Tinvestor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
МО											
MT											
NE											
NV											
NH											
NJ											
NM											
NY											
NC											
ND											
ОН											
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OR		X							X		
PA											
RI											
SC											
SD											
TN											
TX		X							×		
UT											
VT											
VA											
WA											
wv											
WI											

	APPENDIX										
1	Intend to non-a investor	2 to sell accredited as in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
PR											